SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, FEBRUARY 16TH, 1918.

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British Medical Association.

CURRENT NOTES.

The Education Bill.

ON December 14th, 1917, a deputation from the British Medical Association waited on the President of the Board of Education to urge that the scope of Clauses 18 and 19 of the Education Bill should be limited to medical inspection, the proposed extension of the power to provide medical treatment being excluded from them.[1] As a result of this deputation it was hoped that the suggestion of the Association would be carried into effect, especially in view of the fact that the bill had been withdrawn on the understanding that a new bill would be at once introduced. At the Council meeting on January 23rd it was reported that the bill had been reintroduced in an amended form as regards some of its clauses, but that Clauses 18 and 19 were unaltered. After discussion, the Council recorded its opinion that Clause 18 of the Education Bill ought to be deleted, and authorized the Medico-Political Committee to take appropriate action in support of this decision. Discretion was given to the Committee, should it not be found feasible to obtain the omission of the whole of the clause, to revert to the former policy of pressing for amendment of the clause by leaving out power to provide medical treatment.

Payment of Medical Officers of Auxiliary Hospitals.

Since the last Representative Meeting, when this matter was very fully debated, many inquiries as to the payment of medical officers of auxiliary hospitals have been addressed to the Central Medical War Committee; it appeared that the methods and the amount of remuneration varied considerably in different areas. When the question was raised with the War Office, the Committee received the reply that it was proposed to issue a circular dealing comprehensively with the subject; but, in spite of several reminders by the Committee, the circular has not been issued. The Committee, therefore, in its quarterly report to the Council of the Association, had to express its regret that, in spite of repeated representations to the War Office, and obvious dissatisfaction in many parts of the country, the authorities have not yet dealt firmly and finally with this matter. At its last meeting, on January 30th, the Committee decided to press upon the authorities the desirability of settling the question by the payment of a uniform sum of 10s. a day, in the same form and manner as obtain in the Aldershot Command.

Inquiry into the Composition of the Central Insurance Pool.

At the Conference of Local Medical and Panel Committees held in October last, when the subject of the inquiry into the composition of the Central Medical Benefit Pool was being discussed, representatives of several Committees said they had no doubt their Committees would be glad to subscribe to the cost of this inquiry. No application has yet been made to the Panel Committees on the subject, but the following Committees have already spontaneously forwarded subscriptions to be applied to this purpose: Gloucestershire, Essex, and Staffordshire. The Staffordshire Committee forwarded its subscription "as a mark of its appreciation of the work of the Insurance Acts Committee."

[1] SUPPLEMENT, January 19th, 1918, p. 9. See also SUPPLEMENT, November 3rd, 1917, p. 91.

Association Notices.

ANNUAL REPRESENTATIVE MEETING, 1918.

THE Annual Representative Meeting of the Association, 1918, will be held in London on Thursday, July 25th, 1918, and following day(s) as may be required.

Notices of Motion from Divisions and Branches for the consideration of the Annual Representative Meeting, proposing to make any addition to or any amendment, alteration, or repeal of any Regulation or By-law, or to make any new Regulation or By-law, or proposing material alteration of the policy of the Association in matters relating to the honour and interests of the medical profession or of the Association (Article 30, By-law 40), must be published in the BRITISH MEDICAL JOURNAL not later than the issue of May 25th, and for this purpose should be received by me not later than May 16th, 1918.

By order,

ALFRED COX,
Medical Secretary.

January 28th, 1918.

Meetings of Branches and Divisions.

LANCASHIRE AND CHESHIRE BRANCH: MID-CHESHIRE DIVISION.

THE following officers have been elected for 1918:

Chairman: Dr. W. C. Renshaw. *Vice-Chairman:* Dr. H. G. Cooper. *Representative in Representative Meetings:* Dr. T. W. H. Garstang. *Deputy Representative:* A. T. Blease. *Representatives on Branch Council:* Drs. H. A. Burrows, A. T. Blease. *Secretaries:* A. T. Blease and P. R. Cooper.

THE ORGANIZATION OF THE PROFESSION AND RURAL PANEL PRACTITIONERS.

SIR,—The correspondence in recent numbers of the SUPPLEMENT shows that rural practitioners are at last becoming alive to their grievances, or rather that they are beginning to give them adequate expression.

It seems to have been a fixed idea among the Insurance Commissioners that, owing to the lower sickness incidence, the country doctor would have less work in proportion than his brother in the town. Experience has completely knocked the bottom out of this fallacy. The sickness incidence *may* be less, but it must be remembered that the town doctor sees probably 60 to 70 per cent. of his patients in his surgery, the country doctor probably 30 to 40 per cent. The insured person does not relish the idea of walking a distance to see his doctor when he considers that it is his right to send for him.

There are few country doctors who have not had the experience of going five or six miles into the country

to find his patient going about or even at his work. Employers, too, are quite alive to the advantages of the situation. A ploughman, perhaps, is off work for a day through a cold. His employer will tell him that if he is unfit for his work he must call in his panel doctor, especially as it costs nothing. .

It is not only the country doctors who realize the injustice of their position. In his admirable pamphlet on "Medical Benefit in Scotland" the clerk to the Insurance Committee of the County of Lanark expresses his opinion with no uncertain voice and shows by statistics how fallacious is the argument that the country doctor has less to do in proportion to his panel than the town man.

It is to be hoped that the Insurance Committees will show a better appreciation of the position than they have done in the past. Dr. Brackenbury's statement is little more than a confession of ignorance. Country doctors may have been inarticulate, but it must be remembered that in few instances can they afford the time to attend meetings and conferences, and when they do they have little chance of a hearing.

The Rural Practitioners Subcommittee does not appear to be doing much. The member for Scotland, the late Dr. Grant, of Blantyre, though a most excellent man, could not in any sense be termed a rural practitioner. His practice was in a large mining village on the outskirts of a considerable town.

The country doctor must realize that the time has come to make a fight for his position, and if the Insurance Acts Committee will not or cannot look after his interests an independent organization must be formed.

I, for one, would regret anything in the nature of a split in the Association, but the members must recognize the rights of every class in the profession to fair treatment.—I am, etc.,

M. BRYSON,
Secretary, Panel Committee, Dumfriesshire.

Thornhill, Dumfriesshire, Jan. 28th.

SIR,—I should like to comment upon Dr. Baigent's letter (SUPPLEMENT, January 12th) from the townsman's point of view.

The case for better treatment of the rural panel practitioner is overwhelming, and it seems to me that differences of opinion can only arise in connexion with the method of securing the remedy.

There are statements in Dr. Baigent's letter with which I cannot agree. He says, for instance:

> When the Insurance Bill was first considered and the capitation fee arranged . . . I believe the original intention was to divide the capitation grant in such a way that rural practitioners would receive payment on a higher scale than the town doctor.

So far as it refers to the *capitation grant*, I challenge that statement. I had occasion to follow closely the Insurance Bill during its passage through Parliament, and I have not before been aware of any suggestion that the capitation fees should be divided unequally between town and country practitioners.

As I understand the matter, any extra allowance to rural practitioners was to be made from a special fund (the mileage fund) which was to be set up quite independently of the capitation grant, and, so far as I know, it was never intended that deductions should be made from the capitation fee of the townsman, to be added to the capitation fee of the country practitioner.

It is necessary to keep clearly in view how the remuneration of the panel practitioner is made up; disregarding extras, such as temporary residents, we have:

1. *The capitation fee*, which was a flat rate of (as we supposed) 6s. 6d. a head, and was accepted, more or less willingly, by all classes of practitioners, town and country alike, as payment for all ordinary services, which, under agreement, could properly be demanded from the average practitioner, for insured persons who reside within a limited distance of the practitioner's residence (in my agreement the distance is two miles). It is intended to cover all expenses incurred in attending insured persons, including locomotion, within the limited distance, as well as remuneration for services rendered. The nature and extent of these services must, of course, vary according to the practice, and this applies not only to town and country, but also to colliery, industrial, and health resort panel practice.

2. *The mileage allowance* is a separate and distinct fund, and has no connexion with capitation fees. As Dr. Baigent says, in rural practice the distances are longer, expenditure of time per visit greater, working expenses higher, and work harder. These special conditions of hardship peculiar to country practice only arise, of course, in attending persons who live beyond the distance covered by the capitation fee, and the mileage allowance was created for the particular purpose of remunerating practitioners for these specially arduous conditions, and it is the only fund which can properly be called upon to meet those conditions.

3. *The Drug Fund* is for the purpose of providing drugs and appliances either through practitioners or chemists. It has no connexion with capitation fee or mileage allowance.

These three funds are therefore entirely separate, and each for a specific purpose, and I submit if the Drug Fund is inadequate to cover the increased cost of drugs, this is no reason for pilfering part of the capitation fee, but is a very pertinent reason for increasing the Drug Fund.

Similarly, if the mileage allowance is inadequate, and I am sure it has been grossly so, this also is no justification for annexing part of the capitation fee, but it is a proper and potent reason for adjusting the mileage fees.

In my opinion, the only satisfactory solution for the rural practitioner is that he should have a sufficient and fixed payment per mile travelled, which should fairly cover time as well as outlay involved in transit.

I am sure Dr. Baigent would receive general support in this, as I am sure he will receive opposition if, as he suggests, he proposes to take away from the townsman part of his properly and hard-earned capitation fee to supplement an inadequate mileage fund.—I am, etc.,

W. MURRAY.

Thornaby-on-Tees, Feb. 2nd.

INSURANCE.

NATIONAL INSURANCE, 1914–17.

THE Report on the Administration of National Health Insurance during the years 1914–17 recently presented to Parliament is divided into parts describing the work of the Joint Committee and the four countries separately. Practically all the questions dealt with of interest to the medical profession have been noticed in the BRITISH MEDICAL JOURNAL as they arose, and a general notice of the report, and a special notice so far as it relates to Ireland, has already been given, and it is now further proposed to refer to the parts that relate to England, leaving Scotland and Wales to a subsequent notice. In connexion with the work of the Joint Committee, the establishment of the new Advisory Committee of 48 members in place of the old committee of 168 members is recorded. Actuarial questions affecting the approved societies are dealt with at length, and it appears that, taking England alone, the amounts paid for sickness and maternity benefits have fallen considerably from 1914, but the Commissioners believe that the high rates of sickness benefit during the earlier years were not normal, but due to some extent, specially in the case of women, to inexperienced supervision of claims. On the other hand, disablement benefit has increased more than five-fold since 1914, and further increase may naturally be expected for some years until it attains its normal.

The financial provisions of the Acts as they affect soldiers and sailors and the position of the Navy and Army Fund are explained in detail, but nothing of importance is added to what has appeared in the JOURNAL. On July 1st, 1917, the number of discharged men entitled to benefits out of the Navy and Army Fund was 22,468, and the number of men notified for tuberculosis by the naval and military hospitals was 8,420. To compensate Insurance Committees for the additional cost of dealing with these cases additional funds have been voted by Parliament, and the arrangements made to secure co-ordination between insurance and pensions authorities in the provision of treatment for disabled men are fully described. Among the other activities of the Commission in connexion with the war is that of securing a continuance of an adequate medical and pharmaceutical service for the civil population in view of the number of doctors and pharmacists required for the forces, and work done in co-operation with the Central Medical War Committee is described.

In certain places it has been necessary to make special arrangements for the treatment of persons engaged in the construction of War Office camps and munition works, and something like 12,000 persons have been treated under these arrangements. Under the scheme for the provision of free medical service to the dependants of serving sailors and soldiers, which came to an end in August, 1916, when the War Pensions Statutory Committee was formed, about 400,000 medical books were issued and payment was made for about 1¼ million prescriptions. About 12,000 doctors and 6,500 chemists volunteered their services under the scheme.

The effect of the war in imposing increased work on the lessened staffs of approved societies is dealt with at length, and it is stated that the total contributions of societies towards the financing of the war by investment in War Securities of moneys arising through National Health sources is about £7,000,000, apart from the sums invested in these securities by the National Debt Commissioners on behalf of the Commission. The number of approved societies operating in England in 1916 was 1,475, but in the public interest the membership is only given for the beginning of the war, when it was 10,874,079.

An abstract of cash receipts and issues out of the National Insurance fund is given for 1915 and 1916, and it appears that the total receipts in 1915 were £20,438,129, and in 1916, £19,016,790. In the latter year the amount received from the sale of stamps was rather over £13,500,000, and the Exchequer grants were £3,744,000. The amount paid out to societies for benefits and administration was about £7,024,000, and to Insurance Committees for medical and sanatorium benefits and administration £4,975,529, while about £5,320,000 was handed over to the National Debt Commissioners for temporary investment.

(To be continued.)

THE INCREASED MILEAGE GRANT.

THE clerk of the Insurance Acts Subcommittee (Scotland) of the British Medical Association has forwarded a copy of a letter issued by the Scottish Insurance Commissioners to the clerks of Insurance Committees in Scotland, dealing with the extra mileage grant on account of war conditions. This letter closely resembles that issued by the English Insurance Commission on January 21st, and reproduced in the SUPPLEMENT of January 26th. As in the case of England, application forms must be forwarded not later than February 21st.

WAR EMERGENCY FUND OF THE ROYAL MEDICAL BENEVOLENT FUND.

THE following subscriptions have been received from Divisions of the British Medical Association in response to the recent appeal, and have been passed on to the Treasurer of the War Emergency Fund. The names of individual subscribers are published monthly in the advertisement pages of the JOURNAL:

	£	s.	d.
Southport Division, per Dr. R. Harris, Hon. Sec. ...	81	8	0
Glasgow Central Division, per Dr. W. S. Syme, Hon. Sec. (three instalments)	151	2	0
Bolton Division, per Dr. T. O'Neill, Hon. Sec. ...	10	10	0
Chesterfield Division, per Dr. H. B. Fletcher, Hon. Sec ..	21	0	0
Swindon Division, per Dr. Dismorr, Hon. Sec.	8	18	0
Torquay Division, per Dr. G. Young Eales, Hon. Sec.	35	8	0
Leeds Division, per Dr. J. Allan, Hon. Sec.	2	2	0

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

THE following appointments are announced by the Admiralty: Staff Surgeons L. M. Morris, A. K. S. Shand, J. Fullarton, W. N. L. Cherry, J. G. Peebles, T. W. Myles, and E. R. L. Thomas, to rank as Fleet Surgeons. Surgeon H. E. White to the *Proserpine*. Temporary Surgeons: C. H. Laver, to Chatham Hospital; R. C. W. Staley, to Haslar Hospital; W. O'G. Donoghue, to Plymouth Hospital. To be temporary Surgeons: A. L. Johnston, G. H. Sims, G. H. StG. Griffiths.

ROYAL NAVAL VOLUNTEER RESERVE.

Surgeon Probationers: J. P. Hope, to the *Lance*; F. R. Hall, to the *Laverock*; G. W. Hollings, to the *Porpoise*. To be Surgeon Probationers: C. C. Elliott, C. F. Edmunds, H. Hollingbourne, G. W. Owen, J. R. Hetherington, H. S. Savage, A. G. Mathieson, A. Bearblock, O. M. Duthie.

ARMY MEDICAL SERVICE.

Surgeon-General T. H. J. C. Goodwin, C.M.G., D.S.O., to be Deputy Director-General.

Surgeon-General J. C. Culling, C.B., is placed on retired pay.

Lieutenant-Colonel J. V. Forrest, C.M.G., to be temporary Colonel whilst employed as Deputy Director of Medical Services, Lines of Communication.

ROYAL ARMY MEDICAL CORPS.

Temporary Lieut.-Colonel D. Macaulay relinquishes his commission.

Captains (acting Lieut.-Colonels) to be Majors: A. S. Littlejohns, D.S.O., W. Egan, D.S.O., C. R. M. Morris, D.S.O., R. E. U. Newman, M.C., E. M. O'Neill, D.S.O., G. B. Edwards, D.S.O., J. W. L. Scott, D.S.O., T. T. H. Robinson.

Captains (Brevet Majors) to be Majors: R. G. H. Tate, M. G. Dill.

Captain (temporary Major) to be Major: P. Sampson, D.S.O.

Captains to be Majors: C. M. Drew, A. G. Cummins, M.C., W. R. Galwey, M.C., R. G. Archibald, D.S.O., F. A. McCammon, M.C., G. de la Cour, A. Dawson, A. S. Williams, D.S.O., V. C. Honeybourne, C. T. Edmunds, V. G. Johnson, E. W. M. Paine, F. D. G. Howell, D.S.O., M.C., J. B. Grogan, W. C. Smales, D.S.O., A. H. Bond, T. C. C. Leslie, D. de C. O'Grady, L. G. Gibson, P. S. Stewart, T. W. O. Sexton.

Temporary Major A. G. Phear to be temporary Lieut.-Colonel.

Temporary Major J. C. Webb relinquishes his commission and is granted the honorary rank of Major.

Temporary Captain C. M. Row to be temporary Major without increased emoluments whilst specially employed.

Temporary honorary Major T. M. Burn-Murdoch relinquishes his commission on ceasing to be employed at Springburn and Woodside Central Red Cross Hospital.

Temporary honorary Lieutenant G. Hodge to be temporary honorary Major whilst in charge of the Springburn and Woodside Central Red Cross Hospital.

Temporary Major W. H. Bryce, from Craiglockhart War Hospital, to be temporary Captain.

Temporary Captain W. H. Allen relinquishes the rank of temporary Major on ceasing to command troops on a hospital ship.

Temporary Captain R. H. McGillycuddy, M.C., to be acting Major whilst commanding troops on a hospital ship.

Temporary Captain E. F. Ackery to be temporary Major without increased emoluments.

The following relinquish their temporary commissions:—Lieut.-Colonels: E. H. Taylor, A. R. Parsons, T. E. Gordon. Majors: W. A. Winter, R. C B. Maunsell, C. P. Ball, A. J. McA. Blaney, D. Kennedy. Captains: W. Boxwell, F. H. McC. C. Crawley, M. R. J. Hayes, G E. P. Meldon. Temporary Captains: R. J. Rogers, R. Brookes, J. S. Fowler, G. Thom, H. M. Churchill, J. Bain, C. J. Singer, D. McM. Dickson, B. E. Spurgin, W. E. Barker, A. J. Beadel, A. Davidson, H. E. Dyson, D. Kennedy, T. Meagher, M.C., F. Barnes, R. J. English, M. W. Talbot (and is granted the honorary rank of Captain), T. S. Brook, R C. J. Stevens, C. H. Mossop, V. E. Sorapure, H. H. Tipping, E. Purcell, C. Berry, W. A. Berry, J. S. English, G. W. Fleming, J. C. Wilson, I. A. Dowling, J. Craig, E. Ashby, C. W J. Dunlop, J. A. Montgomery, W. A. Murphy, J. W. Harvey, T. H. Twigg, D. M Clements, J. G. Higgins, F. P. Grove, S. Lyle, J. P. O'Connor, B. H. Shaw, D. Forde, M. J. Houghton, W. L. A. Leslie, R. P. McDonnell, J. A. Cameron, A. E. Sutton, J. H. Egbert, R. Proctor, J. MacArthur, C. Bannigan, M C., J G. Taylor, H. Caplan, F. M. Murphy, F. M. Murray, E. Evans, M C., J. Lee, P. H. Rawson, M.C., W. G. Thompson, S. A. D'Arcy, J. Warwick, J. I. O'Sullivan, M.C., J. A. Arkwright, E. Mansfield, J. H. Crofton, S. R. Richardson, G. Sutherland, P. de C. Potter, W. H. Gray, J. E Ruck, A. R. O. Milton, B. T. Edye, R. Roberts, W. V. Pegler, C. R. Skyrme, H. W. Evans, J. D. Finlay, G. J. Jones, R. D. Bell, J. Humphreys, M. Ffoulkes, J. R. Forde. Temporary Lieutenants: I. Clarke, E. O'Reilly, D. A. H. Moses, F. B Elwood, A. Y. Hutchison, E Tempany, N. Flower, A. G. Holms, T. H Macfie, B. A. Slocombe, J. R. Sinton, J. H. Pratt (and is granted the honorary rank of Lieutenant).

Temporary Captains relinquish their commissions on account of ill health contracted on active service and are granted the honorary rank of Captain: L. A. P. Burt, D. Campbell, F. Murchie.

Temporary Captains relinquish their commissions on account of ill health contracted on active service: S. L. Alexander, T. E. Hammond, R. L. Norman.

Temporary Captains S. Ritson and D. S. Steele-Perkins and temporary Lieutenant G. Ba nes relinquish their commissions on account of ill health.

To be temporary Captains: W. Millerick, C. R. Brown; temporary Lieutenants H. Barber, J. T. W. Stewart, H. F. Devis, G. H. Jones, J. P. Fehily, M. Henry, J. W. Lindsay, A. E. Woodall, T. E. Regan, J. D. Laidlaw, J. R. O'Brien, G. R. Rew, H. F. Stephens, R. D. MacGregor, G. C. Swanson, H. W. Perkins, A. G. Jenner, J. L. Johnston, W. J. Isbister, M.C., T. C. D. Watt, M.C., G. Robertson, J. G. Havelock, D. H. Fraser, M.C., S. Marle, T. H. G. Shore, R. Dane, E. A. Runting, E. J. Peill, A. P. Draper, M.C., A. H. Bostock, D. L. Morrison, F. R. Tickle, V. G. Ward, H. S. McLennan, A L Gardner, J. H. F. Wilgress, W. E. Tanner, J. Howells, H. L. W Wemyss, F. Osborne, H. H. V. Welch, K. L. Bates, L. V. Gatt, N. Bradley, J. Crean, H W. Windsor-Aubrey, O Barton, N. Navarra, W. E. Peck, A. J. B. Leckie.

The notification in the *London Gazette* of October 8th, 1917, regarding temporary Captain C. L. Dold is cancelled.

Lieutenant L. L. Cassidy, from Unattached List T.F., to be temporary Lieutenant (substituted for notifica ion in the *London Gazette* of November 18th, 1914).

To be temporary Lieutenants: C. Dean, F. Heatherley, R. Theron, J. W. O'Farrell, G. D. M. Beaton, V. J. A. Wilson, C. E. F. Salt, F. King, G. C Maguire, J. A. Johnson, S. S. Rosebery, G. Young, A. L. Sutherland, W. H. A. Elliott, H. S. Dixon, A. Barrett, A. T. Moon, G. H. Rodolph, F. A. Hadden.

SPECIAL RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

Major H. G. Smeeth, M.D., relinquishes the acting rank of Lieut.-Colonel on reposting.

Captain T. Gray, M.B., relinquishes his commission on account of ill health.

Lieutenants to be Captains: J. T. Westby, J. H. E. Annequin, O. C. L. Hughes, W. C. Craig, G. C. McEwan, R. J. Smith, P. D. McLaren, J. R. S. Mackay, R. A. Woodhouse, E. R. W. Gilmore, J. A. Panton, N. C. L. B. Tweedie.

J. O. Hamilton, late Captain, to be honorary Captain.

G. N. Groves, from Edinburgh University Contingent O.T.C., to be Lieutenant.

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel (temporary Colonel) F. Kelly relinquishes his temporary rank on vacating the appointment as Assistant Director of Medical Service, and is restored to the establishment.

Lieut.-Colonel (Brevet Colonel) J. A. Rooth is dismissed from His Majesty's Service by sentence of a general court-martial, January 12th, 1918.

Major (temporary Lieut.-Colonel) S. A. Coad to be Lieut.-Colonel.

Captain (acting Major) S. R. R. Matthews relinquishes his acting rank on an alteration in posting.

Captain A. A. McWhan, to be temporary Major whilst specially employed.

Captain G. Holmes, M.B., resigns his commission on account of ill health, and is granted the honorary rank of Captain.

Captain G. Henderson resigns his commission on account of ill health contracted on active service, and is granted the honorary rank of Captain.

Captain A. R. Short, M.D., is restored to the establishment.

Captain G. W. Ellis is seconded whilst holding a special appointment.

Captain C. T. Matthews, from T.F.R., to be Captain, with precedence from April 1st, 1915.

Private L. Lloyd, from R.A.M.C., to be Lieutenant.

VOLUNTEER FORCE.

Lancashire Volunteer Regiment, 4th Battalion.—Medical Officer and temporary Lieutenant J. J. M. Dewar to be temporary Captain. *7th Battalion.*—H. B. Bates to be Medical Officer and temporary Lieutenant.

County of London Volunteer Regiment, 2nd Battalion.—A. R. Oakley, late Captain R.A.M.C., to be Medical Officer and temporary Captain.

Monmouthshire Volunteer Regiment, 1st Battalion.—G. A. H. Martin to be Medical Officer and temporary Lieutenant.

Northumberland Medical Volunteer Corps.—J. Harrison and M. Bruce to be temporary Majors; D. Revie to be temporary Captain.

Dorsetshire Medical Corps.—T. D. Manning to be temporary Captain.

Kent Medical Corps.—J. H. Yolland to be temporary Lieut.-Colonel.

Glamorganshire Volunteer Regiment, 2nd Battalion.—Medical Officer and temporary Lieutenant C. Biddle to be temporary Captain.

Glamorganshire Medical Volunteer Corps.—E. A. Evans (late Captain R.A.M.C.) to be temporary Captain.

Hertford Medical Volunteer Corps.—P. G. H. Bayon to be temporary Captain.

Buckinghamshire Volunteer Regiment—1st Battalion.—H. Barrett to be Medical Officer and temporary Lieutenant.

Middlesex Volunteer Regiment—1st Battalion.—Medical Officer and temporary Captain H. Tipping relinquishes his commission on being appointed to a commission in the R.A.M.C.

North Riding Volunteer 2/3rd Battalion.—J. C. B. Williams to be Medical Officer and temporary Lieutenant.

VACANCIES.

NOTICES REGARDING APPOINTMENTS.—Attention is called to a Notice (see Index to Advertisements—Important Notice re Appointments) appearing in our advertisement columns, giving particulars of vacancies as to which inquiries should be made before application.

BARROW-IN-FURNESS: NORTH LONSDALE HOSPITAL.—Second House-Surgeon. Salary, £250 per annum.

BRISTOL ROYAL INFIRMARY.—(1) House-Physician; (2) House-Surgeon. Salary, £120 per annum.

BURY INFIRMARY.—Junior House-Surgeon. Salary, £200 per annum.

COSFORD UNION, Hadleigh.—Medical Officer and Public Vaccinator of the Boxford Relief District. Salary, £50 per annum.

DERBY: DERBYSHIRE HOSPITAL FOR SICK CHILDREN.—Resident Medical Officer (lady). Salary, £200 per annum.

DERBYSHIRE ROYAL INFIRMARY.—Resident Surgical Officer.

DUDLEY: GUEST HOSPITAL.—Vacancy on Honorary Surgical Staff.

GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—House-Physician. Salary at the rate of £100 per annum.

HEMEL HEMPSTEAD: WEST HERTS HOSPITAL.—Resident Medical Officer.

LIVERPOOL PARISH.—Resident Assistant Medical Officer for the Brownlow Hill Poor Law Hospital. Salary, £300 per annum.

MANCHESTER CORPORATION.—(1) Lady Medical Officer with experience in the treatment of Children's Diseases. (2) Temporary Assistant Tuberculosis Officer. Salary, £400 and £450 per annum respectively.

NOTTINGHAM CHILDREN'S HOSPITAL.—House-Physician and Anaesthetist (female). Salary, £250 per annum.

NOTTINGHAM: NOTTS EDUCATION COMMITTEE.—Assistant School Medical Officer. Salary, £350 per annum.

NOTTS COUNTY COUNCIL.—Assistant Tuberculosis Officer. Salary, £500 per annum.

OLDHAM COUNTY BOROUGH.—Assistant Schools Medical Officer. Salary, £325 per annum, rising to £400.

PLYMOUTH EDUCATION AUTHORITY.—Assistant School Medical Officer. Salary, £300 per annum, rising to £350.

PLYMOUTH: SOUTH DEVON AND EAST CORNWALL HOSPITAL.—House-Physician (male). Salary, £200 per annum.

PRESTON ROYAL INFIRMARY.—Resident Medical and Surgical Officer. Salary, £120 per annum.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—(1) Temporary Surgeon in charge of Ear, Nose, and Throat Department. Honorarium, £25 per annum. (2) Clinical Assistant.

ROCHDALE INFIRMARY AND DISPENSARY.—Junior House-Surgeon. Salary, £200 per annum.

ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.—Resident Medical Officer. Salary, £300 per annum.

ROYAL LONDON OPHTHALMIC HOSPITAL, City Road, E.C.—Second House-Surgeon. Salary, £75 per annum and war bonus.

UNIVERSITY OF LONDON.—External Examiner in (1) Obstetric Medicine, (2) Pathology, (3) Pharmacy.

WESTMINSTER HOSPITAL, S.W.—Physician.

WESTMORLAND CONSUMPTION SANATORIUM AND HOME, Meathop.—Second Assistant Medical Officer. Salary, £200 to £250 per annum.

WHITECHAPEL DISPENSARY FOR THE PREVENTION OF CONSUMPTION.—Temporary Medical Officer. Salary, £500 per annum.

WILTS EDUCATION COMMITTEE, Trowbridge.—Dental Surgeon. Salary, £250 per annum.

WOOLWICH BOROUGH.—Woman Assistant Medical Officer of Health. Salary, £500 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces the following vacant appointments: Biggleswade (Bedford), Farnborough (Hants).

To ensure notice in this column—which is compiled from our advertisement columns, where full particulars will be found—it is necessary that advertisements should be received not later than the first post on Wednesday morning. Persons interested should refer also to the Index to Advertisements which follows the Table of Contents in the JOURNAL.

APPOINTMENTS.

BURGESS, W. L., M.D.Edin., Medical Officer of Health for Dundee, vice C. Templeman, M.D.Edin., deceased.

ROBINSON, M. E., M.B., B.S.Melb., Resident Medical Officer to the Middlesex Hospital.

WATT, J. Leslie, M.B., Medical Officer of Health for the Urban District of Tavistock.

DISTRICT MEDICAL OFFICERS.—V. C. H. Dearden, L.R.C.P. and S.Ed., L.R.F.P.S.Glas., of the Sheffield Union. F. J. H. Martin, M.R.C.S., L.R.C.P., of the Belvoir (Out-Relief) Union. H. H. Moyle, M.R.C.S., L.R.C.P., of the Sturminster Union. F. Postlethwaite, M.R.C.S., L.S.A., of the Tavistock Union. A. Sinha, L.R.C.P. and S.Ed., L.R.F.P.S.Glas., of the Sheffield Union. F. H. P. Wills, L.M.S.S.A., of the Maidenhead Union.

ST. THOMAS'S HOSPITAL.—The following appointments have been made:—Casualty Officers and Resident Anaesthetists: F. N. V. Dyer, B.A.Cantab., M.R.C.S., L.R.C.P.; J. G. Lawn, B.A.Cantab., M.R.C.S., L.R.C.P.; E. J. Pakenfees, M.R.C.S., L.R.C.P.; H. I. Marriner. Casualty Assistant: F. R. G. Hief, B.A.Cantab. Resident House-Physicians: F. G. Wood, B.A.Cantab., M.R.C.S., L.R.C.P.; G. H. Sims, M.R.C.S., L.R.C.P.; F. P. Dutton, M.A., M.B., B.Ch.Oxon., M.R.C.S., L.R.C.P.; H. B. Russell, M.R.C.S., L.R.C.P. Resident House-Surgeons: P. F. Bishop, B.A.Cantab., M.R.C.S., L.R.C.P.; R. M. Humphreys, B.A., M.B., B.Ch.Oxon., M.R.C.S., L.R.C.P.; C. B. Cohen, B.A.Cantab., M.R.C.S., L.R.C.P.; M. E. Jones, M.R.C.S., L.R.C.P. House-Surgeon to Block 8: T. F. M. Dilworth, M.B., B.Ch., B.A.O., N.U.I. Obstetric House-Physicians: H. T. Cubbon, B.A.Cantab., M.R.C.S., L.R.C.P.; J. M. Higginton, B.A.Cantab., M.R.C.S., L.R.C.P. Ophthalmic House-Surgeon: D. McM. Dickson, M.C., M.R.C.S., L.R.C.P. Clinical Assistant (Throat): R. A. Walker.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is **6s.**, *which sum should be forwarded with the notice not later than the first post on Wednesday morning in order to ensure insertion in the current issue.*

MARRIAGE.

BARKER—WALLER.—On November 14th, 1917, at St. Saviour's Church, Nagano, Shinshiu Province, Japan, by the Rev. James Chappell, assisted by the Right Rev. Bishop Hamilton, and previously at the British Consulate-General, Kobe, before R. G. E. Forster, Esq., H.B.M.'s Consul-General, Frederic Barker, M.B., of Kobe, to Jessie Kiku, only daughter of the Rev. J. G. Waller, M.A., and Mrs. Waller, of Nagano.

DIARY FOR THE WEEK.

WEDNESDAY.

HUNTERIAN SOCIETY, 1, Wimpole Street, W.—5 p.m., Annual Oration by Dr. O. K. Williamson: General Arterio-sclerosis.

POST-GRADUATE COURSES AND LECTURES.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales General Hospital, Tottenham, N.15.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C., 5 p.m.—Monday: Professor F. G. Parsons: Structure of the English Skull. Wednesday and Friday: Professor E. K. Martin: Projectile Fracture of Limb Bones.

ROYAL SOCIETY OF MEDICINE.—*Section of Odontology:* Monday, 7.30 p.m., Captain Kelsey Fry and Lieutenant H. M. Johnston, R.A.M.C.: Radiography of Injuries of the Lower Jaw. Dr. Howard Mummery: Tubular Enamels. Tuesday, 5 p.m. General meeting of Fellows. *Section of Pathology:* Tuesday, 5 p.m., Dr. J. W. Cropper: A Counting Chamber for Enumeration of Protozoa, etc. Dr. J. A. Murray: (1) Autologous Grafting in Malignant and Non-malignant Conditions; (2) Tumour from the Zoological Gardens. *Section of History of Medicine:* Wednesday, 4.30 p.m., Exhibition of Books, Pictures, etc. 5 p.m., Dr. Charles Singer: English Medicine before the Normans. Dr. R. Hingston Fox: *Post-mortem* Records, 1813-1821; Matthew Baillie's Work in Morbid Anatomy. *Section of Dermatology:* Thursday, 5 p.m., Cases. *Section of Neurology:* Thursday, 8.30 p.m., Clinical Meeting at the London Hospital, Whitechapel, E.: Demonstration by Dr. Head of Cases of Wounds of the Nervous System, to be followed by a general discussion. *Section of Study of Disease in Children:* Friday, 4.30 p.m., Cases.

DIARY OF THE ASSOCIATION.

Date.	Meetings to be Held.
	FEBRUARY.
18 Mon.	London: Naval and Military Committee, 2.30 p.m.
19 Tues.	London: Insurance Acts Committee, 11.30 a.m.

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